

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 26, 2002 8:00 am**  
**Secretary of State**

02-26-2002 90044 021 \*\*\*150.00

**DOCUMENT # H74875**

1. Entity Name  
**K.P. CARTER CONSTRUCTION, INC.**

Principal Place of Business      Mailing Address  
**220 VENUS STREET #12**      **220 VENUS STREET #12**  
**JUPITER FL 33458**      **JUPITER FL 33458**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number <b>59-2584109</b>	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>CARTER, FAYE</b> <b>17988 APRIL LANE</b> <b>JUPITER FL 33458</b>			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City, State, Zip Code		
			<b>220 Venus St #12</b> <b>Jupiter FL 33458</b>		

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: *Faye Carter*      DATE: **2-8-02**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2002 Fee will be \$550.00</b> <b>*Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VTD</b> <b>CARTER, KEVIN P.</b> <b>17988 APRIL LANE</b> <b>JUPITER FL</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PVP</b> <b>Faye Carter</b> <b>220 Venus St #12</b> <b>Jupiter FL 33458</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PSD</b> <b>CARTER, FAYE E</b> <b>17988 APRIL LANE</b> <b>JUPITER FL</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>220 Venus St. #12</b> <b>Jupiter, FL 33458</b>
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*      Date: **2-8-02**      Daytime Phone #: **561-747-3136**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

UC900000

CR2E034 (9/01)